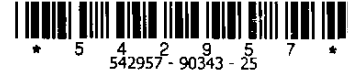


FILED
Apr 30, 1999 8:00 am
Secretary of State

04-30-1999 90157 026 ****61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 768577 1. Corporation Name JUPITER VILLAGE TOWN HOMES PHASE EIGHT CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 900 E. INDIANTOWN ROAD #210 JUPITER FL 33467			Mailing Address 900 E. INDIANTOWN ROAD #210 JUPITER FL 33467		



* 5 4 2 9 5 7 - 90343 - 25 *



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26		05/23/1983	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		59-2321667	
City & State		City & State		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
23		28		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
Zip		Zip		Country	
24		29		30	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
CAMPBELL, THERESA 900 E. INDIANTOWN RD #210 JUPITER 33477				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				85 Zip Code			
				FL			

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE		(NOTE: Registered Agent signature required when reinstating)		DATE	
Signature, typed or printed name of registered agent and title if applicable.					
12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	VD	☐ DELETE	1.1 TITLE	VPO	☒ Change ☐ Addition
NAME	ESPISITA, J		1.2 NAME	ESPISITA, John	
STREET ADDRESS	301 LAKEWOOD DR 88		1.3 STREET ADDRESS		
CITY-ST-ZIP	JUPITER FL 33458		1.4 CITY-ST-ZIP		
TITLE	VD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	SCHOLL, NORBERT		2.2 NAME		
STREET ADDRESS	706 STONEWOOD CT, 18C		2.3 STREET ADDRESS		
CITY-ST-ZIP	JUPITER FL		2.4 CITY-ST-ZIP		
TITLE	SD	☐ DELETE	3.1 TITLE	TD	☒ Change ☐ Addition
NAME	SUTHERLIN, J.		3.2 NAME	SUTHERLIN, Judy	
STREET ADDRESS	703 STONEWOOD CT 18C		3.3 STREET ADDRESS		
CITY-ST-ZIP	JUPITER FL		3.4 CITY-ST-ZIP		
TITLE	PD	☒ DELETE	4.1 TITLE	SecD	☐ Change ☒ Addition
NAME	CURCIO, FRANK		4.2 NAME	Karen Bolin	
STREET ADDRESS	408 LAKEWOOD CT, 6A		4.3 STREET ADDRESS	407 LAKEWOOD CT 5-D	
CITY-ST-ZIP	JUPITER FL		4.4 CITY-ST-ZIP	Jupiter, FL 33458	
TITLE	TD	☒ DELETE	5.1 TITLE	Asst SecD	☐ Change ☐ Addition
NAME	PRATT, SHEILA		5.2 NAME	Perrone, Debbie	
STREET ADDRESS	408 LAKEWOOD CT, 4A		5.3 STREET ADDRESS	102 LAKEWOOD DR 22-C	
CITY-ST-ZIP	JUPITER FL		5.4 CITY-ST-ZIP	Jupiter, FL 33458	
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Judge [Signature]* **4/24/99 561-655-1877**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (1/98)